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Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S82476 (0)

1. Corporation Name

CHURCH STREET MEDICAL CENTER, P.A.

[redacted]

Principal Place of Business	Mailing Address
37944 Church Street Dade City, Florida 33525	37944 Church Street Dade City, Florida 33525

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9/25/91

2. Principal Place of Business	2a. Mailing Address
21 c/o 38135 Market Square	26 c/o 38135 Market Square
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Zephryhills, FL	28 City & State: Zephryhills, FL
24 Zip: 33540 25 Country: U.S.A.	29 Zip: 33540 30 Country: USA

4. FEI Number: 59-3084498 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GASSMAN, ALAN S. 1245 COURT STREET SUITE 102 CLEARWATER FL 34616	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, type or print name of registered agent, and the title of that agent. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SARAIYA, CHANDRESH S. 38029 ARBOR RIDGE DR. ZEPHYRHILLS FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition c/o 38135 Market Square Zephryhills, Florida 33540
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition 600002543416 -06/02/98--01018--001 ***450.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition PE 4.8

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [illegible] 3/30/98

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 6/01/98                CORPORATE DETAIL RECORD SCREEN                3:52 PM
NUM: S82476       ST:FL ACTIVE/FL PROFIT       FLD: 09/25/1991
FEI#: 59-3084498
NAME      : CHURCH STREET MEDICAL CENTER, P.A.
PRINCIPAL: C/O 38135 MARKET SQUARE                        CHANGED: 04/08/98
ADDRESS    ZEPHRYHILLS, FL 33540
RA NAME   : GASSMAN, ALAN S.
RA ADDR   : 1245 COURT STREET                             ADDR CHG: 05/01/95
            STE 102
            CLEARWATER, FL 34616 US
ANN REP   : (1996) A  07/01/96    (1997) B  05/19/97    (1998) AY 04/08/98



1. MENU, 3. OFFICERS


ENTER SELECTION AND CR:
 6/01/98              OFFICER/DIRECTOR DETAIL SCREEN                3:52 PM
CORP NUMBER: S82476        CORP NAME: CHURCH STREET MEDICAL CENTER, P.A.
TITLE: D       NAME: SARAIYA, CHANDRESH S.
                     C/O 38135 MARKET SQUARE
                     ZEPHRYHILLS, FL 33540



+ NEXT, - PREV, 1. MENU, 2. FILING, 3. TOP


ENTER SELECTION AND CR:
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